The Children's Commission

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ANNUAL REPORT

B.C.'s Child and Youth Services in Transition

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Honourable Geoff Plant
Attorney General
of British Columbia

I have the honour to transmit herewith my annual report to you, to be laid before the Assembly in accordance with the provision of Part 2, Sections 9 (1)(a) and (4) of the Children's Commission Act.

Paul Pettus

Children's Commissioner

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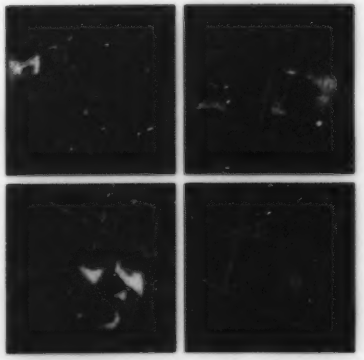

THE CHILDREN'S COMMISSION
ANNUAL REPORT 2001

FROM THE CHILDREN'S COMMISSIONER

I have had the privilege of being the children's commissioner since September 1999. I am very proud of the work that commission staff have done, and it is with sadness that I witness the end of the commission.

This is the final annual report of the Children's Commission. Part 1 of the report provides an overview of the commission's work over the last five and a half years, as well as the work we have done in 2001 and early 2002. Part 2 picks up where our previous annual report, *Blueprint for a Better Future for B.C.'s Children and Youth*, left off. It looks briefly at progress made over the last year, and outlines progress that must be made over the coming year in order to better serve children and to help communities begin the process of keeping their children and youth healthy and safe.

Over the years, the commission has consistently identified a number of areas in the child-serving system that need improvement, areas such as prevention and early intervention, the health and safety of Aboriginal children, and mental health services for youth. (A complete list of the areas identified is included on page 9.) The commission's evidence shows that much work remains to be done in these areas. As significant changes are made in the child-serving system over the next few years, it will be important to remember that, while everything else changes, including the adults in charge, the needs of children do not. The areas we have identified as needing improvement, based on our evidence and the rights of children, must remain priorities.

I recognize that the ministry will be facing financial challenges over the next few years, and that moving forward on these priorities will be a challenge. It is therefore more important than ever that dollars be spent wisely. However, if it becomes clear that the financial allocations are not sufficient to meet high-priority needs, and especially where it is clear that an increase in funding will save money in the future, it is incumbent on the Ministry of Children and Family Development and the minister to forcefully present these requirements to government. The needs of children and youth cannot wait until economic times get better.

But meeting the needs of children and youth is not the responsibility of the Ministry of Children and Family Development alone. Many ministries play an important role in supporting families, through health care, income support, child care programs, and housing programs. Policies in these ministries can seriously compromise any attempts by the Ministry of Children and Family Development to improve services for children, by increasing child poverty or reducing support services to children.

A co-ordinated approach that puts children first requires a cross-government commitment, and a strong and effective partnership with parents, families, communities and children and youth themselves. Most importantly, any changes in the delivery of services must be made on the basis of evidence. A strong emphasis on evidence-based research and program evaluation will help to ensure that limited taxpayer dollars are being spent to the best advantage for children, youth and their families.

The ministry is moving towards the devolution of responsibilities to communities. I support the principle of devolution. However, careful implementation is essential. Communities will be able to deliver services effectively, but, especially while they are developing their capacity to do so and implementing this significant change, they will need support, stability and resources.

There must be few reorganizations in the ministry, with clear and consistent direction provided, and roles and responsibilities clearly defined. Government must be committed to assisting communities in developing their capacity to provide services, as well as to providing the resources they will need to do the job well. Government must also maintain a strong central role for setting standards and policy and monitoring for compliance, and people delivering services in communities – regardless of where they are in the province – must be trained to meet provincial standards. The ministry must ensure that regions and communities receive timely and accurate information. Finally, the readiness of each community must be accurately assessed, and assistance provided on a community-by-community basis.

The Children's Commission and a dedicated ministry for children came into being as a result of the tragic death of Matthew Vaudreuil. The story of Matthew's life is well known. He was seen by dozens of professionals in a number of B.C. communities, but information was not shared among them. A risk assessment to determine the level of risk of abuse to Matthew was never done. There wasn't a designated person to make sure that he received the supports and services he needed. In other words, there was no integrated case management. The result of these inadequacies was that Matthew was not protected.

As the proposed changes – particularly devolution – are made in the child-serving system, it will be more important than ever to remember what happened to Matthew Vaudreuil, and to keep what we learned squarely before us. Another tragedy like Matthew's could happen; we must do everything we can to avoid it.

Soon there will be a new, integrated office, and a Child and Youth Officer, looking out for British Columbia's children and youth (see page 22). The new office will play an important role in the years ahead, particularly as the child-serving system undergoes the proposed changes. The office will be monitoring the changes, to determine if they lead to better outcomes.

The Office for Children and Youth will need the support of both the public and government if it is to succeed in its role. Government can provide this support in two ways. First, it must respect the independence of the office, as it did that of the Children's Commission and the Office of the Child, Youth and Family Advocate. Second, it must provide the resources and access to information that the new office will need in order to do an effective job. Children must see – not only in words, but more importantly in actions – that governments and communities are ready to truly put them first.

In closing, I want to thank everyone who has supported the Children's Commission in carrying out its work over the past five and a half years. I especially want to thank the dedicated, hardworking staff of the commission for the important contribution they have made to improving the lives of British Columbia's children and youth.

Paul Pallan
Children's Commissioner

PART 1

THE CHILDREN'S COMMISSION
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THE CHILDREN'S COMMISSION

The Children's Commission has a mandate to:

- review all deaths of children in B.C., and investigate those which require an investigation to determine the adequacy of services or to examine public health or policy issues
- review and investigate critical injuries of children in care
- make recommendations concerning deaths or critical injuries, if the commission considers this will enhance the safety and protection of other children
- hear and resolve complaints made to the commission about breaches of the rights of children in care and decisions about designated services to children by the Ministry of Children and Family Development
- set standards for the internal review of complaints about provision of services to children by the Ministry of Children and Family Development, and monitor adherence to those standards
- review plans of care for children in continuing custody of the Ministry of Children and Family Development, and ensure that these plans meet legislative and policy standards, and
- inform the people of B.C. about the state of the province's child- and family-serving system, and invite public comment on the commission's work.

The commission is an independent agency and reports to government through the attorney general. In addition, we regularly provide the general public with information about our activities and findings. This information includes regular reports on reviews of child fatalities, and public release of tribunal panel decisions on complaints. Annual reports provide the opportunity to report on our other activities, such as care plan reviews and critical injury reviews. A youth report is prepared annually to reflect the views of youth. The commission also prepares special reports from time to time.

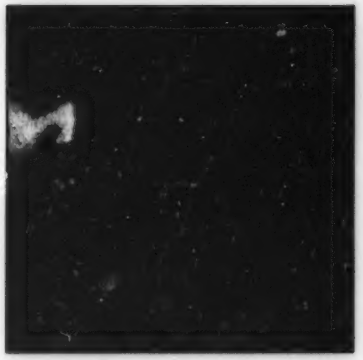
AN OVERVIEW OF OUR WORK, 1996–2002

The Children's Commission was established in September 1996 as a direct result of the report of the Gove inquiry (1995). Over the past five and a half years, the commission has:

- investigated and published 769 child and youth fatality reports in 24 public releases
- issued and followed up on 897 recommendations resulting from fatality reviews
- investigated 142 critical injuries of children and youth in care
- reviewed 2,733 care plans for children in continuing custody
- received over 1,400 complaint calls and inquiries
- referred 17 complaints to a tribunal panel for decision
- conducted two evaluations of the Ministry of Children and Family Development client complaint process
- conducted a special investigation into a group of child removals in Quesnel
- conducted two reviews at the request of the attorney general
- held a forum on fetal alcohol syndrome and published a special report
- produced two special releases on child and youth safety issues
- published a "First Three Months Report" in early 1997 and four annual reports in subsequent years
- published four youth reports
- conducted studies on suicide deaths in children and youth, the influence of alcohol on child and youth deaths, the influence of violence in child and youth deaths, and the educational attainment of children in care (the first two have been published in academic journals).

Throughout these activities, the commission has consistently identified a number of areas needing attention and improvement. These interconnected areas are:

- prevention and early intervention
- services for children and youth in care
- the health and safety of Aboriginal children
- improved access to and relevance of mental health services
- services and supports for youth
- injury prevention education and programs
- information sharing
- risk assessment
- integrated case management
- education and training for service providers.



THE CHILDREN'S COMMISSION
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PART 1
LOOKING BACK

The rest of Part 1 includes descriptions and highlights of the major areas of the commission's work. More detail can be found in the separate program area reports, including ***Fatality Reviews, Critical Injury Reviews, Care Plan Reviews*** *and* ***Complaint Reviews****, which are companion documents to this annual report.* *(See page 32 for information on how to get copies of the program area reports.)*

INVESTIGATIONS

FATALITY REVIEWS

The Children's Commission is informed of all deaths of B.C. children and youth who die before their 19th birthday and all deaths in B.C. of children and youth from other jurisdictions. All unexpected deaths are reviewed, as are the deaths of all children in care of the government or of children who were receiving services from the Ministry of Children and Family Development.

The purpose of a review is to determine the adequacy of services to the child (including but not limited to health and social services, the justice system and the school system). Some reviews also lead to an examination of public health and policy matters. Based on its findings, the commission makes recommendations and works with ministries and agencies to improve services and supports for children and youth.

The commission monitors responses to all of its recommendations to determine if needed changes are being made and to assess the progress of implementation, tracking both those recommendations oriented to specific cases and those which address systemic issues.

In 2001/02

The deaths of 344 children and youth were reported to the commission. (Note: This is a slightly higher number of deaths than recorded by the Vital Statistics Agency, because out-of-province deaths of B.C. children and deaths of out-of-province children in B.C. are included in commission counts but not in Vital Statistics Agency counts.) The commission made 69 recommendations as a result of 216 completed reviews.

While the number of child and youth deaths remained almost constant from 2000 to 2001, there has been a steady decline in deaths over the past 13 years. This is primarily a result of sharp declines in natural and accidental deaths. (See Table 1.)

Key findings

The commission has identified a number of areas of concern as a result of its analysis of child and youth deaths this year. All of these areas involve factors in the deaths that could have been prevented.

Aboriginal children

- Of the 215 investigations completed by the commission, 45 involved the deaths of Aboriginal children and youth. Many of these young people did not have adequate support and felt isolated from their school environment. Their families often did not have the services and supports they needed.

Suicide

- Sixteen cases of suicide deaths were completed.
- Eight of the youth who committed suicide were Aboriginal.
- The most common factors identified in the suicide deaths were a history of depression, a previous suicide attempt, social isolation and alienation, a lack of meaningful connection to school, substance abuse, ongoing family conflict, substance abuse within the family, loss of a significant person through death or a relationship breakup, personal failure, school failure, humiliation, conflict with the law, and bullying.
- In nine of the cases, the ministry was involved with the youth and family. In seven of the nine cases, inadequacies were identified in the provision of services by the ministry.

Car crashes

- Excessive speed, driver inexperience and failure to use safety restraints were factors in the majority of the 38 deaths of youths resulting from car crashes.

Table 1: Child fatalities, 1998–2001*

Year of Death	Natural	SIDS	Accidental	Suicide	Homicide	Undetermined	All Causes
1988	354	75	158	28	14	1	630
1989	330	77	151	25	13	3	599
1990	360	64	145	12	11	2	594
1991	300	71	118	22	16	4	531
1992	305	63	116	24	15	8	531
1993	257	52	150	12	4	7	482
1994	321	41	116	21	25	9	533
1995	279	51	115	24	12	7	488
1996	281	27	107	15	16	3	449
1997	253	27	105	28	20	9	442
1998	229	18	87	17	2	7	360
1999	208	17	98	21	7	7	358
2000	198	10	90	23	11	13	345
2001	208	11	68	6	1	49	343
All Years	4583	764	1955	311	190	134	7937

* Source: BC Vital Statistics Agency
* There are more undetermined deaths in the more recent reporting years because classification of more recent deaths have not been finalized.

- In seven of the youth motor vehicle accident cases, driver fatigue was identified as a factor.
- In 10 of the cases, driver impairment was identified as a factor.
- Of the eight pedestrian deaths, impairment was a factor in five. Four of the pedestrians were impaired. In one case, the driver was impaired.

Other deaths

- Of five drowning deaths involving motor boats, four of the children or youth were not wearing life jackets.
- In eight of the 20 Sudden Infant Death Syndrome deaths reviewed, it was noted that the infant was sleeping in the same bed as an adult at the time of death.

TRACKING RESPONSES TO THE COMMISSION'S RECOMMENDATIONS

Note: The commission follows up on each recommendation by requesting additional information on implementation status from the ministry, agency or individual at regular intervals. When the commission is satisfied that the recommendation has been implemented or other action has been taken that improves services to children and youth, the recommendation is closed. Of the 897 recommendations publicly released by the commission, 402 have been closed. The 69 recommendations made as a result of 2001 fatality reviews are not closed, as they require more time for implementation. The majority of the remaining 426 recommendations have been partially implemented.

Under the Children's Commission Act, the commission is empowered to "make recommendations concerning any deaths or critical injuries investigated...if the commission considers this will enhance the safety and protection of other children."

Since its inception in 1996, the Children's Commission has identified numerous policy, practice and safety issues in the review of child fatalities, and made recommendations for change to the broad child-serving system. The commission has made and publicly released 897 recommendations. The vast majority of ministry and agency responses to the recommendations have been positive and generally comprehensive in nature.

Here are some examples of implemented recommendations:

Safety and injury prevention

- reclassification of an imported herbal product and entry into Canada refused until it meets new product guidelines
- presentations of the "Operation Lifesaver Program" in schools in conjunction with the Canadian Pacific Railway

Services to youth

- development of improved policy and criteria for the provision of services to youth under age 19 in adult safe houses

Information sharing

- changes to contract language to more clearly define expectations around the reporting and the timing of child protection reports
- development of improved policies and standards for the reporting of unexpected child and youth deaths between emergency medical personnel, coroners and police

Prevention and early intervention

- revision or updating of school district policies on identification and referral of children who are showing indications of behavioural and/or learning difficulties, and ensuring that staff are aware of policies and sensitized to the needs of at-risk students
- revision or amendment of procedures to ensure that all identified cases of reportable diseases are immediately reported to the B.C. Centre for Disease Control

Risk assessment

- completion of *Practice Principles: A Guide for Mental Health Clinicians Working with Suicidal Children and Youth* by the Ministry of Children and Family Development with the University of British Columbia's Suicide Prevention Information and Resource Centre (SPIRC) and a provincial advisory committee

Integrated case management

- use of an integrated case management model by all schools in a particular school district, with personnel from several schools meeting on a weekly basis to review at-risk students

Education and training

- introduction of training in pediatric diabetic ketoacidosis (DKA) for all third-year medical students, and exposure of all pediatric residents to management of DKA in children using a protocol developed in B.C.
- development of a suicide prevention protocol by a school district, and provision of school staff with in-service training using a train-the-trainers model

Services to Aboriginal children and youth

- development by a band and the ministry of protocols

for the transfer of files for on-reserve clients, and introduction of monthly meetings to enhance communication, address case issues and update one another on agency activities

CRITICAL INJURY REVIEWS

The Children's Commission reviews critical injuries of children in government care, and makes recommendations based on these investigations to enhance the safety and protection of children and youth. The commission's authority to investigate critical injuries is limited to those injuries that meet the definition as set out in the Children's Commission Act. The act defines a critical injury as one that may result in the child's death or cause serious or permanent impairment of the child's physical health.

Ministry field offices notify the Director of Child Protection of critical injuries of children in care, who in turn reports these to the commission. The commission conducted a random audit in 2001 and found that critical injuries were generally being identified and properly reported to the commission.

In 2001/02

- The ministry reported 185 cases to the commission, 108 of which were identified as critical injuries to be investigated.
- The commission completed 107 critical injury investigations.

Key findings

- Eighty-seven per cent of critical injuries involved youth between the ages of 13 and 18.
- Thirty-one per cent were suicide attempts or other acts of self-harm. Of the suicide attempts, 66 per cent were made by females. Thirty-five per cent of the females attempting suicide were Aboriginal – significantly higher than for Aboriginal males (eight per cent). In total, 26 per cent of the suicide attempts/self-harm acts were by Aboriginal children and youth.
- In 50 per cent of the critical injuries, care plans were not completed or the plan was significantly out of date. As many of the critical injuries involved youth with multiple needs, including mental health diagnoses, the absence of care planning is a significant issue.
- Forty-six of the critical injuries involved youth in continuing custody; of these, 43 per cent were Aboriginal.
- Lack of adequate and appropriate services was a theme in many of these cases. This was particularly the case for youth with mental health issues. In some cases, the youth was hard to engage in services that were offered; in other cases, the youth was referred to a service but was then waitlisted.
- Many of the cases reviewed showed early family involvement with child protection. Parental alcohol and drug problems and neglect were common in the early lives of these youth. In addition, the child protection response was often inadequate or lacked follow-up to ensure that the children were not at continuing risk.
- A lack of appropriate placements was apparent in many of these cases. This resulted in a large number of placement changes, which in turn often resulted in the youth being labelled "hard to place."
- Many reviews indicated positive attempts by foster parents and ministry workers to respond to the needs of "high-risk" youth. Many of these placements ultimately broke down as a result of the youth's behaviours and tendency to run away, and the caregiver's inability to protect the youth from the dangers to which he or she was exposing him- or herself. It is clear that alternative approaches to meeting the needs of these youth are required.

RIGHTS OF CHILDREN IN CARE

70 (1) Children in care have the following rights:

(a) to be fed, clothed and nurtured according to community standards and to be given the same quality of care as other children in the placement;

(b) to be informed about their plans of care;

(c) to be consulted and to express their views, according to their abilities, about significant decisions affecting them;

(d) to reasonable privacy and to possession of their personal belongings;

(e) to be free from corporal punishment;

(f) to be informed of the standard of behaviour expected by their caregivers and of the consequences of not meeting their caregivers' expectations;

(g) to receive medical and dental care when required;

(h) to participate in social and recreational activities if available and appropriate and according to their abilities and interests;

(i) to receive the religious instruction and to participate in the religious activities of their choice;

(j) to receive guidance and encouragement to maintain their cultural heritage;

(k) to be provided with an interpreter if language or disability is a barrier to consulting with them on decisions affecting their custody or care;

(l) to privacy during discussions with members of their families, subject to subsection (2);

(m) to privacy during discussions with a lawyer, the Child, Youth and Family Advocate, the Ombudsman, a member of the Legislative Assembly or a member of Parliament;

(n) to be informed about and to be assisted in contacting the Child, Youth and Family Advocate;

(o) to be informed of their rights under this Act and the procedures available for enforcing their rights.

COMPLAINT RESOLUTION AND REVIEW

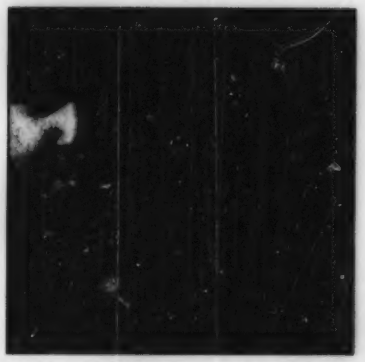
The Children's Commission reviews complaints about breaches of rights of children in care and about decisions concerning services provided by the Ministry of Children and Family Development. If a complaint is not resolved through the ministry's internal complaint resolution process, a child or youth or his or her advocate can then make a complaint directly to the Children's Commission. The commission hears complaints about alleged breaches of Section 70 rights, as well as complaints concerning services provided by the ministry.

Commission staff try to resolve complaints in a manner that is child-centered and the least disruptive to the young people involved. They use various approaches, including mediation and resolution proposals. In some situations, however, the commissioner will dismiss the complaint or will have the complaint reviewed by an independent tribunal panel.

In 2001/02*

- The commission opened 530 complaint files, 446 in 2001 and 84 in 2002. The overwhelming majority of these complaints were addressed by referring people to the ministry process and mediation.
- The commission dealt with 46 complaints. All of these individuals had exhausted the ministry's processes and had a complaint within the jurisdiction of the Children's Commission.
- Within the 36 accepted complaints, there were 152 separate complaint issues, including 60 alleged breaches of rights and 92 issues about decisions concerning ministry services.
- The parent was the complainant 54 per cent of the time; children and youth were complainants about 12 per cent of the time.
- Five cases were referred to the Tribunal Division in 2001.

*to May 2002



Note: *A file is opened when a complaint has been submitted. In most cases, the file relates to one child or youth, but in some cases, more than one child or youth could be involved. In addition, within each file, there are often two or more issues raised by the complainant.*

Note: *An accepted complaint is one that, in the commission's opinion, is within the commission's jurisdiction, including having exhausted the ministry's complaint review process.*

WHY CHILDREN AND YOUTH NEED A COMPLAINT PROCESS

Children and youth, especially those in care or those requiring services, sometimes feel helpless and alone when they have needs that they believe are not being met adequately, or when there is a conflict with adults who are in positions of authority.

Section 70 of the Child, Family and Community Service Act sets out the rights of children in care in B.C. However, rights mean little to children and youth if they do not have the resources to exercise them.

The Children's Commission's complaint process, along with the ministry's internal complaint process, provided a place where children and youth could truly be heard. These processes also provided the child-serving system with the information needed to strengthen its ability to meet diverse needs.

These decisions are available on the Children Commission's Web site, or from the commission.

Key findings

- Guardianship issues, including plans of care, access, standards of care, and placement decisions, continue to represent about half of the issues in all complaints.
- Special needs issues, such as funding for services, adequacy of services, service accessibility and program eligibility, represent about a quarter of the issues in all complaints.
- Child protection issues are also prominent in these complaints.

TRIBUNAL DIVISION REVIEWS

If a complaint is not resolved through the Ministry of Children and Family Development's complaint resolution process and the Children's Commission complaint resolution and review process, and if the complaint is within the jurisdiction set out in the Children's Commission Act, the children's commissioner can refer the complaint to the commission's Tribunal Division.

If a panel decides that a child's rights have been breached or a complaint about services is justified, it can:

- issue an order to the director caring for the child to ensure that the breach does not continue, or order the person in charge of the service to reconsider his or her decision, and
- make recommendations to the director about the steps that the director might take to achieve the result or resolve the complaint.

If the panel decides that a complaint about a decision made by the ministry is justified, the panel can:

- order a reconsideration of the decision that was the subject of the complaint, and
- make recommendations about the steps that might be taken to resolve the complaint.

If a panel issues orders and recommendations, it can request that the ministry give reasons if a decision is made not to take any steps or to follow the panel's recommendations. On receiving the response, the panel may choose to modify its recommendations. The last step in the review process is for the children's commissioner to consider the response of the director and determine if the steps taken by the director are adequate or appropriate. If the commissioner believes that the steps taken were not adequate or appropriate, he or she may present a report on the matter to the minister and make the report public within 30 days after it was presented to the minister.

In 2001/02

Six cases were in front of a tribunal division panel in 2001/02. The tribunal division completed five of these cases. Three of the cases involved disputes between the ministry and parents about services for children with special needs, and one case involved a terminally ill child. One was dismissed by the panel, as pursuing what were considered historical issues would not have benefited the child.

CARE PLAN REVIEWS

The Children's Commission monitors the planning for children and youth who are in continuing custody to ensure that the Ministry of Children and Family Development is complying with legislated requirements and with its own policy and standards. Each month, the commission receives a list of all children in care, and from the list identifies a sample of children in continuing custody. The commission then requests the care plans and placement histories for these children from the ministry and does an initial review. If the commission finds that the care plan does not comply, the plan is returned to the region for revision. The commission monitors the plans returned to the ministry by reviewing a sample of these plans after 90 days. Any plans that remain non-compliant after the regional review are sent to the Director of Child Protection for further revision.

The number and percentage of children in continuing custody continues to increase (see Table 2). Probable reasons for the increase are changes in policy and legislation to ensure that the children are not left in temporary care for an indefinite period of time. The large number of children in continuing custody has significant implications for the ministry with respect to its guardianship role, particularly in terms of staff workload, training and support.

In 2001/02

The commission made initial requests for 520 comprehensive plans of care (the care plan on file at the time of the commission's request) and reviewed 492 of the requested plans (28 of the requested plans were not reviewed for such reasons as the file being closed at the time of the request, the youth being 19, or the court order having been rescinded).

A child in continuing custody is in the permanent care of the Director of Child Protection, as decided by a judge. Of the children currently in care, 56 per cent are in continuing custody, and 44 per cent of children are in temporary care.

Table 2: Children in care, 1995–2001

	1995	1998 (Dec)	1999 (Dec)	2000 (Dec)	2001 (Dec)
Number of children in care	7003	9751	9660	9725 (10,235)*	9659 (10,229)*
Number of children in temporary care	4474	5683	5075	4703 (4912)*	4241 (4468)*
Number of children in continuing custody	2529	4068	4585	5022 (5323)*	5418 (5761)*
Percentage of children in care who are Continuing Custody Wards	36	41.7	47.5 5	2 (52)*	56 (56)*

*Includes children in the care of First Nations child welfare agencies

Key findings

- The major improvement in care planning seen in the previous two years was not apparent in 2001. Compliance levels for current plans rose significantly in 1999 and 2000, but dropped slightly in 2001 (to 50 per cent from 54 per cent).
- Compliance appears to be directly related to age. For current care plans, 83 per cent of plans for children five and under are compliant. That figure drops steadily with age, with only 33 per cent of care plans for youth over 16 being compliant.
- Less than half of children in continuing custody have a current plan of care. In 2001, the percentage of children with current plans dropped from 51 per cent to 43 per cent. This continues to be a source of concern for the commission.
- The commission's care plan reviews continue to show a major lack of involvement of Aboriginal communities in planning for Aboriginal children. Aboriginal children account for 45 per cent of the children in continuing custody. For current plans, the ministry documented Aboriginal community involvement or invitation to participate in planning only one-third of the time. The percentage drops to 15 per cent if outdated plans are included.

WHY CARE PLANS ARE IMPORTANT

Comprehensive planning addresses a child or youth's individual needs and interests – such as his or her medical needs, strengths and challenges at school, and preferred activities that are enjoyable. Research, as well as the commission's own work in reviewing care plans, shows that good planning can not only save children's lives, but also give them a much better chance of having a happy and productive life.

REACHING OUT

In addition to the work done through its program areas, a significant portion of the Children's Commission's work involves gathering information on the broader systemic issues in the child-serving system, through both consultation and research, and informing the public about those issues.

COMMUNITY CONSULTATION

In 2001, the commissioner met with people in the Okanagan, the Capital Region and the Northwest, including four First Nations communities (Nisga'a, Lax Kw'alaams, Gitxsan, and Gitanyow). The key issues identified in these meetings were:

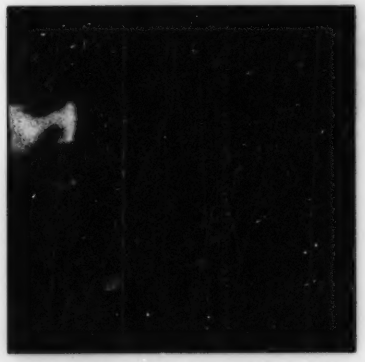
- an inability to respond to community needs because of lack of resources
- lack of consideration of extended family members for placement of First Nations children
- lack of coordination between federal funding formulas and provincial funding for child and family services
- on-reserve staff overwork and burnout
- high risk of youth suicide resulting from alcohol and drug use
- prevalence of fetal alcohol syndrome and lack of resources and support
- lack of youth services and long waiting lists for alcohol and drug treatment
- serious lack of recreational activities for youth on reserve
- over-representation of Aboriginal children and youth in care.

In our meetings with ministry staff in these communities we heard that:

- foster parent training is inadequate
- improvement in care planning is needed
- the lack of services in the North makes it hard to do service planning for care plans (this is particularly true for care plans for Aboriginal children and youth, as some services depend on federal funding).

From community agencies, we heard that:

- poverty is a significant issue for the families they work with
- there were concerns about:
  - the lack of budget increases for early intervention services
  - coming cuts to special education
  - children in care changing schools as a result of a placement change
  - lack of housing for youth
  - transition to adult supports and services for youth with special needs
- there are some good community programs for youth, but the waitlists are very long
- caseloads of Community Living Services workers are too high and families are often not kept informed about the planning for their children.



PUBLIC EDUCATION AND RESEARCH

The commission regularly reports its findings to the public, including progress made in implementing its recommendations.

In 2001/02

The Children's Commission published:

- 221 fatality reports in four separate public releases
- two special reports – *Fetal Alcohol Syndrome: A Call for Action in B.C.*, and "The Role of Alcohol in the Lives and Deaths of Children and Youth in British Columbia" (published in the May/June 2002 issue of the *Canadian Journal of Public Health*)
- a research article – "Youth Suicide Investigations: Risk and Protective Factors and Recommendations for Policy Changes" (published in the *Journal of Child and Youth Care*, 15[1])
- *Blueprint for a Better Future for British Columbia's Children and Youth: The Children's Commission 2000 Annual Report*
- *Youth Magazine 2001.*

Two studies by the commission will soon be published. The first explores the role of violence in the lives and deaths of children and youth who die by homicide, suicide and undetermined causes. It will detail the type of violence that occurred, as well as the role of violence in the perpetrators' pasts. The second examines the educational attainment of children in care, based on data collected by the commission with the ministries of Children and Family Development, Education, and Human Resources, and the Aboriginal Directorate in the Ministry of Community, Aboriginal and Women's Services.

PART 2

THE OFFICE FOR CHILDREN AND YOUTH

On February 7, 2002, Cabinet approved the attorney general's recommendation that the Children's Commission and the Office of the Child, Youth and Family Advocate be eliminated and that an Office for Children and Youth be established to consolidate key oversight and advocacy functions. In the proposed model, the Office of the Ombudsman, the B.C. Coroner's Service and the ministry are assigned modified or additional responsibilities.

Bill 43, the Office for Children and Youth Act, was passed in the legislature on May 15, 2002, and will be proclaimed in the near future.

The key functions of the Office for Children and Youth will be to:

- provide children, youth and their families with information and guidance on becoming effective self-advocates in light of the rights of children and youth in care under the Child, Family and Community Service Act (CFCSA)
- provide children, youth and their families with information and guidance on accessing services that meet their needs
- promote and coordinate the establishment of advocacy services in communities for children, youth and their families
- in extraordinary circumstances, advocate on behalf of children and youth to ensure that their views are heard and considered
- provide support for children, youth and their families by providing government with advice on the effectiveness, responsiveness and relevance of services for children, youth and their families
- monitor services provided for children and youth under the Child, Family and Community Services Act and the Adoption Act, including early childhood development and care services, mental health services for children and youth, addiction services for children and youth, youth justice services, and planning for transition from youth to adult services
- provide government with policy and best practice advice
- conduct investigations at the request of the attorney general
- inform the public about the state of services for children and youth in B.C.

Specific functions of the Children's Commission that will not be performed by the new Office for Children and Youth are fatality investigations and complaint review and resolution. The B.C. Coroners Service will be responsible for conducting all child death reviews, and the Office of the Ombudsman will be the only external, independent reviewer of complaints about services provided by the ministry.

PRIORITIES FOR THE NEXT 12 MONTHS

The Children's Commission's 2000 annual report, *Blueprint for a Better Future for B.C.'s Children and Youth*, contained a set of directions to help the new government build on the foundation already in place to create a better future for the young people of our province. This section revisits some of the priorities identified in that report to briefly highlight progress made this year, and outline what needs to happen over the coming year. The new Office for Children and Youth will continue to monitor and report on progress in these important areas.

STABILITY

In the commission's 2000 report, we asked that the Ministry for Children and Families not be disbanded. The commission is pleased that government has retained an integrated ministry responsible for services to children and youth. It is essential that the Ministry of Children and Family Development remain an integrated whole over the coming years, with a focus on implementing programs rather than on reorganization. The commission also asked for stability in senior management, and at this level, reasonable stability has been maintained.

The Ministry of Children and Family Development is embarking on a massive change agenda, including devolving responsibilities to communities. While these changes are taking place, stability will be essential – in organization, leadership, and services and supports for children and youth.

FUNDING

Government listened to concerns about cutting the ministry's funding. Funding was maintained for 2002. However, there is strong concern at the commission about the 23 per cent cuts to ministry funding proposed for the coming two years. Cutting services and supports sends children and youth a clear message that they aren't cared about. Furthermore, as we have said before, these "savings" often turn into huge costs in future years. *Funding of services to children and youth must be maintained or enhanced – not reduced.*

PREVENTION AND EARLY INTERVENTION

Government listened when the public told them not to cut provincial funding for school programs for children at risk. It is imperative that these programs are maintained. A child can't wait until economic times are better to be fed or have a safe place to be after school.

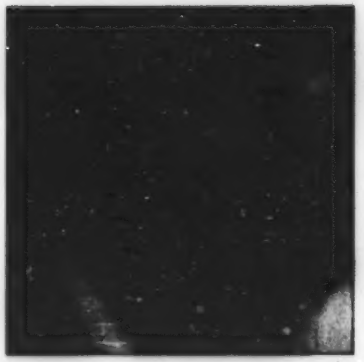
Creating a Minister of State for Early Child Development was a good first step. However, resources and action are needed in this area. Communities are still waiting for early childhood options and an expansion of services and supports to prevent fetal alcohol syndrome.

SERVICES

Youth mental health

Again, creating a Minister of State for Mental Health was a good first step, as was not cutting mental health funding in 2002. It is crucial that mental health funding not be cut in future, but in fact be increased.

Sixteen- to 18-year-olds must receive support to prevent mental health problems and receive adequate mental health and other services when needed. This will be especially important if government goes forward with reducing the numbers of these youth in care. Many of these youth are vulnerable and isolated. If they are to



succeed at school or in the workplace, they must have adequate supports.

Aboriginal children and youth

Government put in place a strategic plan to better serve Aboriginal communities. However, the evidence continues to show that much more will need to be done over the next 12 months to ensure that adequate resources from both provincial and federal governments are available in Aboriginal communities.

Much more focus on finding Aboriginal foster homes is also needed.

Children and youth with special needs

Waitlists continue to be a significant problem. For children with disabilities, waitlists result in valuable time being lost forever. Some children wait for months to receive services that are vital to their development. For a child with a disability such as autism, there is a critical period in which therapy can mean the difference between being able to communicate and participate in school and community and being unnecessarily prevented from doing so. While the commission supports priority services for children from birth to age six, it also emphasizes that the needs of children over age six should not be ignored.

Funding for special education, early childhood programs, and specialists services must be at the very least maintained.

Transition services for youth, particularly youth with disabilities, continues to do be an area where government needs to improve its support and coordination.

EDUCATION AND TRAINING

The ministry has stated its commitment to moving towards giving communities more power in designing services. This is a positive step. However, it will require that ministry staff receive the training and skills they will need in community development and relationship-building to ensure the development of a strong and accountable system for children throughout B.C.

PUTTING CHILDREN FIRST

Over the years, the Children's Commission has heard from many children and youth about their hopes, and about what they would like to see to make British Columbia a better place for everyone.

Gay, lesbian and transgendered youth have told us how hard it is to live with homophobia. Some had been assaulted. Some spoke of the difference that supportive school policies and adults committed to them can make.

Children and youth with disabilities talked about their friends, and their likes and dislikes. They made it clear that they want and have a right to be included, just like everyone else. And that what disables them is not using American Sign Language to communicate or using a wheelchair to get around, but the attitudes of the people around them.

Aboriginal children talked about how they welcome opportunities to learn about Aboriginal culture and how this helps them deal with the discrimination they are sometimes faced with.

Children from visible minorities, some of them new immigrants, have told us of the many things they love about Canada. But they have also expressed the sadness they feel when they hear derogatory comments made about their country of origin or their religion.

What these diverse young people have in common is a desire for mutual respect and understanding. Over and over they have said, "If adults want respect, show us that we are respected." Society has many ways of showing its children whether it cares about them or not. One of the ways it can do this is by showing respect. And respect itself is shown in many ways – most importantly, by ensuring that all children have the right to reach their potential, to be safe and healthy, to have places to play and welcoming places to go to school, to belong to families and communities with the resources to adequately feed and clothe them and provide for them emotionally, and by giving them a future to look forward to. When children have these things, they will grow up expecting to take their place as responsible and caring adults for the next generation of children.

The Children's Commission expects that the new Office for Children and Youth will continue to work with children and youth, the organizations that work with them, and government to move closer to the goal of truly putting the youngest members of our society first.

The child protection system we develop must start with the child and the child's needs; it must value the child as a person. This is often referred to as being "child-centred." The services we provide to children, and the administrative structures we develop to provide those services, must meet children's needs.

There are many ways to meet the needs of children. Often, this is best done by helping families to care safely for their children; a parental support model can be a valuable intervention strategy in protecting needy children and youth. However, if a family cannot take on the responsibility of caring safely for its children, then it is up to the child welfare system to take whatever steps are necessary to protect them. In Matthew's story, the worst fault did not lie in attempting to help Matthew's mother, but in ignoring Matthew. In a truly child-centred protection system, when asked for whom they worked, staff would answer, "For the child."

–The Honourable Judge Thomas J. Gove, *Report of the Gove Inquiry into Child Protection*, November 1995

APPENDICES

APPENDIX A:

CHILDREN'S COMMISSION 2001/02 BUDGET

(Budget shown as of March 31, 2002 – subject to fiscal year-end adjustments)

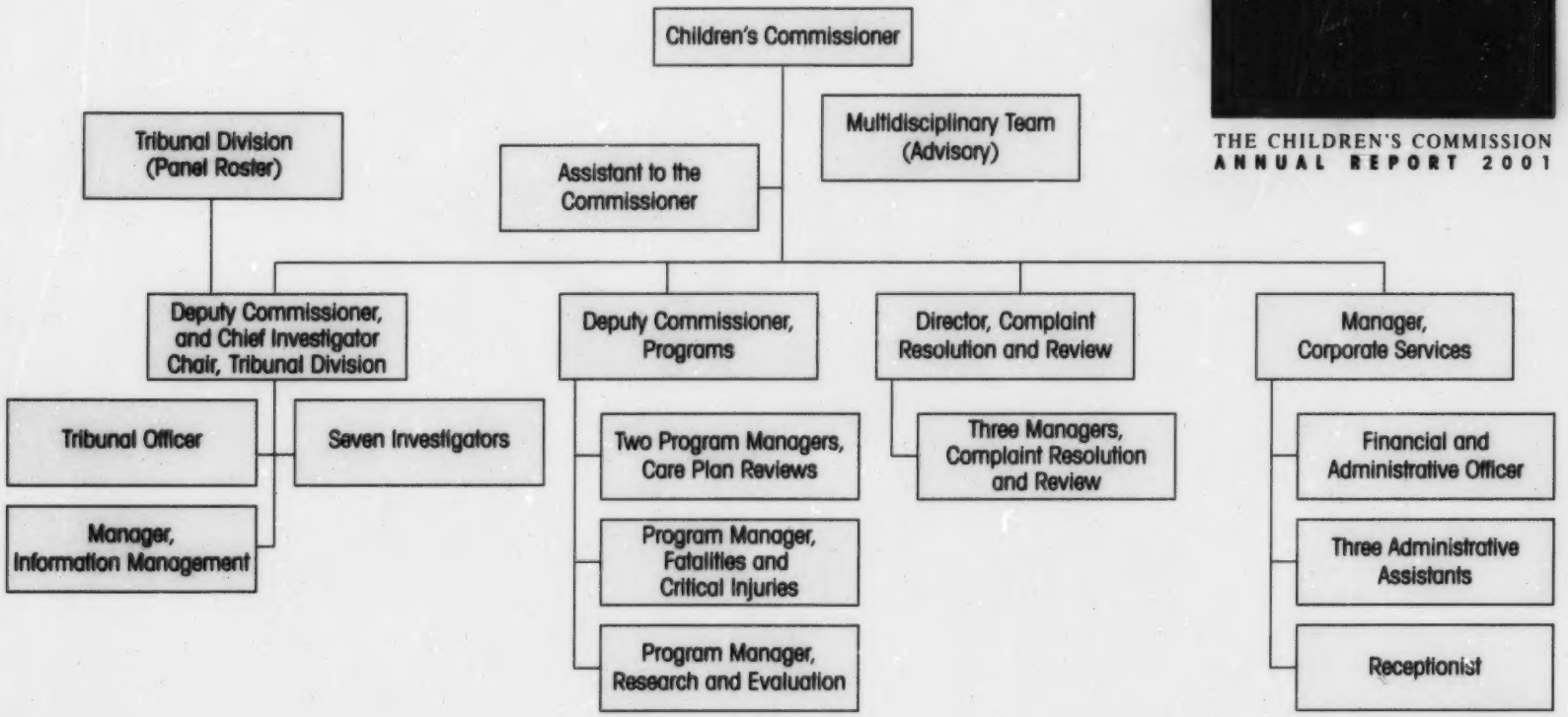
TOTAL OPERATIONAL BUDGET: $3,028,000

Description	Amount ($)	Percentage (%)
Salaries and benefits (27 staff*)	1,889,050	68%
Multidisciplinary team and complaint review tribunal panels	101,537	4%
Commission staff travel	58,833	2%
Operational contracts (legal advice, research and evaluation, investigations, medical advice, etc.)	227,690	8%
Information systems	44,917	2%
General office and business expenses	178,848	7%
Communications (annual report, youth report)	115,196	4%
Building occupancy	150,576	5%

* Full-time employees (FTEs) at the Children's Commission by area:

Complaint resolution and review	4
Tribunal panel support	2
Fatality investigations	9
Care plan review	2
Information management	1
Program development	4
Finance and administration	3
Commissioner's office	2

APPENDIX B: ORGANIZATION OF THE CHILDREN'S COMMISSION



APPENDIX C: CHILDREN'S COMMISSION STAFF

Lauri Balson
Nancy Bell
Stacey Brown
Lorraine Calderwood-Parsons
Anne Colwell
Scott Denoon
Don Easton
Michael Egilson
Wendy Ferguson
Dulcie Fernandes
Margaret-Anne Gallagher
Ron George
John Greschner
Kirsten Ingram
Cindy Jamieson
Cyndie Jones
Eric Jones
Stacie Kirkpatrick
Jeannie MacPherson
Alain Mailhot
Glenna McEwen
Richard Mercer
Wayne Mitic
Renate Nahser-Ringer
Michael Olson
Paul Pallan
Chris Peterson
MaryLynne Rimer
Hendrik Roelants
Frances Sasvari
Torri Seale
Linda Shout
Donna Thompson
Nathalie Tuson

APPENDIX D: MEMBERS OF THE MULTIDISCIPLINARY TEAM

MEMBERS FROM THE CHILDREN'S COMMISSION

Paul Pallan
Children's Commissioner

John Greschner
Deputy Commissioner and Chief Investigator

Torri Seale
Program Manager
Child Fatalities and Critical Injuries

OTHER MEMBERS

Larry Campbell
Former Chief Coroner (Retired)
Province of British Columbia

Inspector Paul Cheney
Officer in Charge, Contract Policing
Royal Canadian Mounted Police

Elaine Herbert
Social Work Practitioner

Dr. Jean Hlady
Director, Child Protection Service Unit
Children's and Women's Health Centre of B.C.

David Kelpin
District Counsellor
Greater Victoria School District

John Lane
Former Deputy Chief
Victoria City Police Department

Ian Mass
Deputy Child, Youth and Family Advocate of B.C.

Nella Nelson
Coordinator, First Nations Education Division
Greater Victoria School District

Dr. Penny Parry
Child and Youth Care Expert

Dr. Shaun Peck
Deputy Provincial Health Officer

Terry Smith
Chief Coroner
Province of British Columbia

Dr. Richard Stanwick
Regional Medical Health Officer and Director
Clinical Information
Capital Health Region

Dr. Glenn Taylor
Paediatric Pathologist
Children's and Women's Health Centre of B.C.

Deputy Chief Geoff Varley
Victoria City Police Department

Joy Ward
Policy Consultant
Health Association of B.C.

APPENDIX E: TRIBUNAL DIVISION

TRIBUNAL DIVISION

John Greschner
Deputy Children's Commissioner
Chair, Tribunal Division

Frances Sasvari
Tribunal Officer

R. Mervyn Child
Tribunal Officer

TRIBUNAL PANEL MEMBERS

Jerry Adams
Executive Director
Urban Native Youth Association

Dr. Kwadwo Ohene Asante
Paediatrician and Clinical Assistant Professor
Paediatrics
University of British Columbia

Shashi Assanand
Executive Director
Vancouver and Lower Mainland Multicultural Family Support Services Society

Lynn Carter
Instructor, Social Service Worker Department
Langara College

Sandy Cooke
Executive Director
Covenant House Vancouver

Greg Eng
Manager of Recreation Services
Vancouver East District
Vancouver Board of Parks and Recreation

Margaret Farley
MPA, Private Consultant

Bruce Hardy
Executive Director
Options: Services to Communities Society

Terry Harris
Barrister and Solicitor

Delores Holmes
Retired Provincial Court Judge

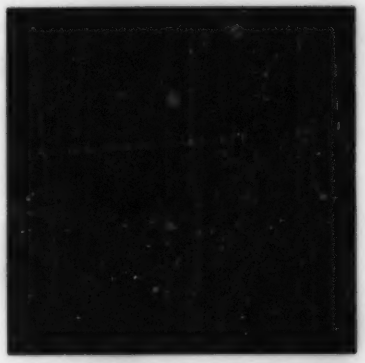
Susan Irwin
Registrar
Board of Registration for Social Workers

Sandra McEwan
Barrister and Solicitor, and Family Law Mediator

Jane Parlee
Country Director, Canada
Save the Children Canada

Shelley Rivkin
Director, Social Services and Community Safety Division
Justice Institute of B.C.

Perry Shawana
Associate Professor and Chair
First Nations Studies Program,
University of Northern British Columbia,
and Barrister and Solicitor



FOR MORE INFORMATION

HOW TO CONTACT US

Please contact the Children's Commission if you would like to comment on this annual report.

Location
4th Floor, 1019 Wharf Street
Victoria, BC

Mailing address
PO Box 9207
Stn Prov Govt
Victoria, BC V8W 9J1

Internet address
www.childservices.gov.bc.ca/

Phone
(250) 356-0831

Toll-free phone
1-800-859-1441

Fax
(250) 356-0837

COMPANION DOCUMENTS FOR *LOOKING BACK, LOOKING AHEAD*

If you wish to receive any of the following program area reports, please contact the Children's Commission:

- Fatality Reviews
- Critical Injury Reviews
- Care Plan Reviews
- Complaint Reviews